



# A year in review

**Andrew Mickel** looks back at some of 2011's most important developments for the profession

**W**ith budget constraints starting to tighten around the UK and elections in three countries triggering new policy directions, it's been a busy year for COT to promote the profession and develop tools for members to defend services. We look back at the biggest work in 2011 and what it means for 2012...

## 2011: the year of the strike

Unrest over the government's plans for reforming health and social care in England and changes to pensions in the UK shot workplace issues to the top of the agenda in 2011.

By March, workplace issues became the top enquiry for COT's professional enquiries line (March, page 6), while the first strike of the year took place in Northern Ireland in October because of how employers were responding to budget cuts (November, page 10).

The first half of the year saw Unison-led union discussions with the government over changes to pension plans. Pension champions were recruited throughout BAOT to inform members about the expected changes to their pensions (June, page 9), and the first OT elected to Unison's national executive council Sandra Dee Masson promised to raise the profile of both the profession and pensions with her new post (August, page 6).

However, the talks failed and 2011 will be remembered for a lot of members as the first time they went on strike (this issue, page 20). BAOT threw its weight behind the action (November, page 6) and many OTs have joined BAOT just so they were eligible to strike.

The strikes are the most visible response to government workforce reforms, but COT has been challenging policy on more subtle fronts. The axing of central workforce data collection in England is being challenged to ensure a clear picture of the state of the profession is maintained (November, page 6).

Julia Scott, COT chief executive, has raised concerns with ministers including Andrew Lansley, and COT is continuing to lobby on the issue.

COT has also developed many tools for members to defend their services, with the most important being COT's high impacts – relaunching this year as OT evidence fact sheets. The existing 10 have been revised, while a further five are due for launch on children and young people with autism, adults with cancer, vocational rehabilitation, public health and rheumatology.

## Battles over England's health bill continue

The COT has been lobbying hard on the Health and Social Care Bill. The biggest chance for change came during spring's

unprecedented legislative pause. COT has responded to consultations from the Future Forum – the body consulting with clinicians and the public on the reforms – and lobbied at all levels of government, including raising the importance of OT with David Cameron (June, page 6).

Since then there have been some wins and losses: despite intensive lobbying, there is still no mandate for clinical commissioning groups to have AHPs on their boards. However, some AHPs are getting seats anyway, and COT is continuing to lobby to get amendments tabled at the House of Lords committee stage to make it mandatory.

A crucial concession has already been won: Clinical Commissioning Group (CCG) boards will have to consult with a wider range of professions, which will now include AHPs. COT has ongoing contact with the Department of Health while these policies are developing.

Peggy Frost, COT head of professional practice, said that members had to make the most of new arrangements they may not like. 'While some OTs might be feeling threatened by "any qualified provider", there are others who are seeing opportunities to put tenders in to private providers,' she said.

Beyond the bill, the new NHS outcomes framework was published, which Genevieve Smyth, COT lead professional affairs officer,

describes as giving a 'clear indication' of how serious public health is now being taken (February, page 6). Following COT's lobbying around the framework, it includes OT-focused outcomes such as quality of life for carers and older people.

More work is being done to shape emerging structures to benefit OTs. Sharon Tuppeny, COT professional affairs officer, has taken up a post with the National Institute for Health and Clinical Excellence (NICE) on its commissioning outcomes committee, which will be selecting the outcomes that clinical commissioning groups will be judged against (November, page 9).

And Julia Skelton, COT director of professional operations, has joined a government working group on social care, ahead of a new white paper this year. As the only AHP on it, she promoting early intervention, integration and finance as key OT issues. It follows the addition of several references to the roles of OTs in England's social care workforce development strategy earlier in the year (July, page 8).

## Integration tops the new Scottish agenda

OTs in Scotland, Northern Ireland and Wales used COT's election manifesto to push politicians to support OT, while candidates for the major parties in all three countries wrote about the profession in *OTnews* (February, March and April issues).

In Scotland, SNP's win means lead commissioning will go ahead, bringing tighter integration between health and social care. COT has been using 2010's *Changing Lives, Changing Practice* document to refocus OTs in social work away from minor adaptations and standard equipment and on to rehabilitation and reablement, helping to get OTs in health and social care to work together.

COT has worked with the Association of Directors of Social Work to prioritise this work, as well as with the Joint Improvement Team to make sure the importance of OTs to reablement services is fully understood.

Meanwhile, Elizabeth Macdonald, COT policy officer for Scotland, said that the country's new AHP delivery plan – a UK first – should give higher visibility of AHPs. It will get AHPs covered by waiting time initiatives, making it easier to quantify the need to safeguard OT posts to meet government requirements.

COT is also meeting with Michael Matheson, the public health minister and an

OT, as well as Jacqui Lunday, the chief health professions officer, to promote the leadership possibilities for OTs in light of changing integration.

## Capitalising on new powers for Welsh Assembly

March saw a referendum pass in Wales that gave the Assembly increased powers in many areas (April, page 8), including health and social care. That is being used following Labour's May election win to develop a new social services bill to take place, due early next year, which is likely to sweep away much historic legislation that Wales currently shares with England.

There are potentially major changes, say Ruth Crowder, COT policy officer for Wales, including many possible benefits for OTs. However she flags one area for concern: it is expected that local authorities will see a shift from local authorities being responsible for providing services, to instead being responsible for providing assessments.

She warns it could potentially put the assessments at risk of resource pressure. COT is continuing to lobby around the new bill.

Elsewhere, the Welsh Board has been working hard to cultivate evidence networks on OT to respond to the new National Clinical Forum, which will advise on health and social care changes in Wales (December, page 6).

The election itself saw AHP hustings organised in the Cardiff North constituency to test candidates on their OT knowledge (June, page 13), while an AHP 'speed dating' event with the new health and social committee helped explain what the different professions do (September, page 13).

## New priorities in Northern Ireland

May's election in Northern Ireland has been followed up by a wide-ranging review of health and social care services. COT has met with the leader of the review, John Compton, following intensive lobbying from Kate Lesslar, COT policy officer for Northern Ireland.

As well as lobbying directly, COT has worked through its membership of the AHPFNI to promote the professions to Edwin Poots, the new health minister, as well as presenting evidence to the new health committee. Work has also been done with the Long Term Conditions Alliance to promote OT interests.

Elsewhere, a draft AHP strategy is being compiled ahead of a final release in March (August, page 7). COT contributed to the consultation around the strategy, providing case studies of OT's worth.

One of the biggest achievements for the year came with a joint conference for OTs from Northern Ireland and the Republic of Ireland. 'In terms of communications between North and South, it's done well', says Kate, 'while helping to encourage more of a conference culture.'

## Promoting the organisation, forging new partnerships

COT has been working hard to develop new resources for members. New videos to target service commissioners have been developed, with films to target those working in children's services, older people and mental health released. Two more videos are due for release early this year, with one on long-term conditions, and one to target general commissioners.

Promoting occupational therapy has meant working with other organisations. Julia Scott, COT chief executive, received NICE's first social care fellowship (May, page 10). She says that as NICE's new role to develop social care standards is made official through the health bill, there should be increasing opportunities to promote OT.

COT jointly attended autumn's political conferences in England with the new College of Social Work, providing a stronger voice to promote the profession.

Work with the Stroke Association on the OT role has led to leaflets for GPs endorsed by the Stroke Association, while COT is also in the early stages of developing more information sharing with Age UK.

And the Princess Royal reopened COT's headquarters in May (June, page 10), and also visited OTs at Staffordshire General Hospital and the Defence Medical Rehabilitation Centre at Headley Court.

## New jobs for OTs

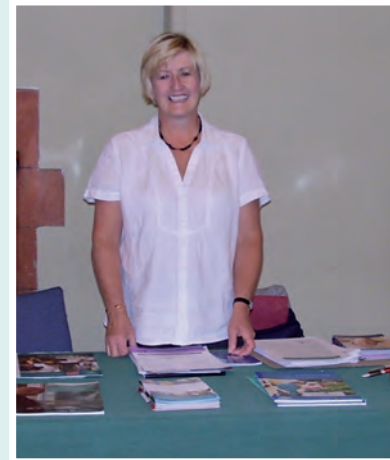
Blue Badge reform has continued apace in all four UK countries. OTs in England are a named profession to take up the role of independent mobility assessors in England, providing a potentially major new role. In Scotland, questions have been raised about whether a similar change of roles will be supported by a transfer of cash (September, page 6). However, after intensive lobbying, former COT Scottish board chairman Jane Arroll has been appointed to review the changes.



BAOT supports strike action for the first time



Meetings with minister Michael Matheson to promote reablement



COT officer Ruth Crowder 'chats up' the new health committee

At a UK level, COT lobbied hard on the sickness absence review, with co-author Carol Black visiting the COT annual conference to hear from OTs (August, page 23). Over 100 responses from OTs were received when COT responded to the review. The recommendations – which are currently with government – would see a focus on musculo-skeletal problems and mental health, which potentially could benefit OTs.

That work would also fit with the AHP fit note, designed to work with the doctor's fit note. Developed by COT in conjunction with other AHP bodies and government departments, it has been successfully piloted in 2011 ahead of a full rollout this year.

In Wales, COT is meeting with Mansel Ayward, chair of Public Health Wales, about how OTs can help around return to work, job retention and occupational health, while in Scotland, OT Judy Gibson joined the government as a health and work adviser (September, page 9).

An announcement is due early in 2011 about the new assessments for the Disability Living Allowance's UK-wide replacement, with a key role expected for OTs following intensive lobbying.

In order to support the emerging role of OTs working with GPs, a COT promotion was held at the Royal College of GPs' conference in October to win an OT's services for the day. Plans are now afoot to roll it out as a continual broking service to get OTs into GP surgeries on a one-day basis, helping to build business opportunities for independent practitioners.

Separately in Northern Ireland, COT has been lobbying around professional roles. In

England and Wales the roles of the approved social worker and responsible medical officer were broadened to allow other professions to take up the roles – the ambition is to replicate that work in Northern Ireland.

### OTs capitalise on the push for reablement

Reablement has become a hot topic for politicians keen to find savings while getting health and social care to work together. With occupational therapy the only profession working across both, a joint briefing by COT and the Social Care Institute for Excellence (SCIE) was released to help OTs realise the role they have to play (December, page 6).

Sixty per cent of local authorities in England used a total of almost £800 million of NHS money to expand or set up reablement services.

Wales' social services framework, released early in the year, promised that all social services in Wales would start providing reablement, and the Welsh Reablement Alliance – started this year with COT as a founding member – is lobbying on it (July, page 11). COT is also working with the health committee on an inquiry into preventing readmissions.

In Scotland, a recent parliamentary debate on reablement and rehabilitation won cross-party support – and included nods to the value of AHPs – reflecting the push for reablement at many levels.

And in Northern Ireland, COT's response to the health and social care review prioritised the OT role in reablement – something that has also been flagged with Michelle Tennyson, the assistant director of

AHPs at the Public Health Agency, and Unison (December, page 7).

### Mental health strategies continue in all the UK

The new mental health strategy for England was released with a big focus on recovery, employment and physical health (March, page 6). COT has since run two networking events on physical health in London and Leeds (see this issue page 47). Lobbying has also helped secure an AHP seat on the ministerial advisory group on implementation.

COT will also be responding to Scotland's new mental health strategy consultation, and is also involved in its AHP strategy, with a large event held in September (October, page 7).

A new draft framework in Northern Ireland saw two COT members provide input that helped OT become the only profession to have its own standard, requiring full annual occupational assessments for people with severe mental health needs (March, page 7).

And Wales' mental health measure finally passed (February, page 8). There is now a consultation on designing primary care mental health services, which could create new roles for OTs.

### Working on a wide range of policies

Dementia has been a big area of activity for COT in 2011. The College signed up to the Dementia Action Alliance in England for 2011 to 2014. The alliance has targets for its 70-strong members, with COT meeting all its targets this year.

An inquiry by the All-Party Parliamentary Group for Dementia, which is chaired by COT President Baroness Greengross, was



New resources to support members



Finding new jobs for OTs



Princess Royal hails UKOTRF's work

also launched (February, page 10), while a good practice compendium was launched to support the delivery of the dementia strategy in England (March, page 9).

COT also attended an expert stakeholder on NICE's dementia care standards to ensure OT is promoted in future, while the COT consultancy service is looking at creating dementia master classes next year.

COT's commitment to help serving and former military service personnel continued with a major practice sharing event in June, including contributions from England's Department of Health, Combat Stress, Poppy Scotland and the Royal Legion. An email network has been developed following the event.

It has been a big year for the profession's work with children and young people. COT responded to England's special educational needs consultation green paper, to highlight the role of OTs in schools and getting the profession more fairly commissioned in future.

It is also now aiming for time with children's minister Sarah Teather to discuss the role, while more work is being done this year to develop an evidence database. A response to the Children's Plan in Northern Ireland, meanwhile, helped to flag up capacity problems in the country.

COT and the College of Occupational Therapists Specialist Section – People with Learning Disabilities worked together on a list of recommendations to prevent abuse following the Winterbourne View scandal (July, page 7). COT has since been called to a series of meetings at England's Department of Health to discuss challenging behaviour.

The third annual review of the end of life care strategy in England mentioned OT for

the first time, while implementation guide the Route to Success was successfully launched at COT's annual conference (August, page 7).

And the Parkinson's Audit was also completed, which involved OTs for the first time, after Amy Edwards, COT professional affairs officer, sat on the audit's steering group. The audit can be used by NHS organisations to respond to their quality accounts; 108 OTs registered to complete the audit.

### Research continues apace

The Princess Royal reopened COT's headquarters in May, and spoke warmly of the achievements of the UK Occupational Therapy Research Foundation (UKOTRF) (June, page 10). UKOTRF's money for OT research was doubled for 2010 to 2011, but has since been halved in order to ensure the Foundation's funding is sustainable (June, page 15).

Seven projects were successfully funded in 2011, and Elizabeth White, COT head of research and development, extended thanks to Irwin Mitchell and the Institute of Social Psychiatry for their continued support. COT has also started work with COTSS-Housing on researching housing adaptations.

Beyond UKOTRF's work, following a piece in *OTnews* about the lack of OTs on the Research Excellence Framework sub-panel which decides AHP research, Avril Drummond was appointed to the panel (July, page 9).

The AHP Research Network (AHPRN) was launched in summer with a call for OTs to get involved. Many COT members have since become involved with the hubs' leadership (July, page 7).

Meanwhile, the *British Journal of Occupational Therapy* got a crucial listing on Thomson Reuters, giving a wider audience to the journal and starting the process to get *BJOT* an impact factor – crucial for demonstrating research's worth (September, page 9). Separately, the library is now providing free access for members to the Canadian and Australian journals through COT's revamped website.

### Profession successfully navigates HPC audit

95 per cent of OTs successfully reregistered with the Health Professions Council (HPC), with COT providing information and support to help those who were selected for audit. Resources included a video featuring COT professional affairs officer Karin Tancock talking about her experiences of audit, which was viewed over 1,000 times on YouTube.

Anna Clampin, COT head of education, urged members to continue to engage with CPD: 'Members should take CPD seriously. While the audits have finished, CPD is still really important for their development.'

The year's biggest CPD event, annual conference, took place in Brighton in June, drawing together the best and brightest of the profession – including several sessions from Mary Law (August, page 14). A record number of abstracts have already been received ahead of 2012's conference in Glasgow, with COT head of marketing Caroline Jones describing the standard as 'very high'.

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